									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2003									10630342					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			19					RATE FEE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			( minus 20=		*	0		X\$ 9=		0	OR	X\$18=		
INDEPENDENT CLAIMS			; minus 3 =		*	0		X43=			OR	X86=		
MU	LTIPLE DEPEN	IDENT CLAIM PR	RESENT					+145	 i=	· · · · · · · · · · · · · · · · · · ·	OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				ı	TOTA	۱L		OR	TOTAL		
CLAIMS AS AMENDED - PART II								SMA	LL I	ENTITY	OR	OTHER		
ΙTΑ		(Column 1) CLAIMS REMAINING AFTER		(Colur HIGH NUM PREVIO	EST BER DUSLY	(Column 3) PRESENT EXTRA		RAT		ADDI- TIONAL		RATE	ADDI- TIONAL FEE	
<b>AMENDMENT A</b>	Total	AMENDMENT ★	Minus	PAID **	FOR	=	ł	X\$ 9	=	FEE	OR	X\$18=	FEE	
	Independent	*	Minus	***		=	ł	X43				X86=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	r CLAIM		-	740			OR		,	
								+145			OR	+290=		
								TOTAL ADDIT. FEE OR ADDIT. FEE						
		(Column 1)		(Colui		(Column 3)	_				· ·-			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9	)=		OR	X\$18=		
	Independent	*	Minus	***		=		X43	 =		OR	X86=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
								+145			OR	+290=		
								TO ADDIT. I	TAL		OR	TOTAL ADDIT. FEE		
		-												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=		X43	 =		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
+145=											OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT. FEE		
***	it the "Highest Nu The "Highest Nur	imber Previously P nber Previously Pa	aid For IN IH id For" (Total o	or Independ	tent) is the	e highest numbe	er fou	und in th	е ар	propriate bo	x in co	olumn 1.		